

Several companies now offer \$4 generic programs. These programs are a great way to save on your out-of-pocket costs. Here is some information to help you get the greatest value from the \$4 programs.

What You Need to Know About the \$4 Generic Programs

Q: My out-of-pocket cost for generic drugs is normally \$10. If I show my Wellmark insurance card, will I be charged \$10 or \$4?

A: You will be charged \$4. Please continue to show your Wellmark insurance card, however, so that the claim is submitted electronically on your behalf and the pharmacist can check to see if the drug may interfere with any other prescription drug you may be taking. In addition, by showing your card, your \$4 payment will apply to your drug card deductible and out-of-pocket maximum, if applicable.

Q: Are the same generic drugs on all of the different programs?

A: No, each company offers different drugs as part of its \$4 generic program. Most pharmacies have printed lists of the \$4 generic drugs at the pharmacy counter or on their Web sites. You may want to get copies of several of the different \$4 generic programs and ask your doctor or pharmacist if any of the generic drugs on the lists are ones you could take instead of your current drugs.



Q: I hear the terms generic equivalent and generic alternative or therapeutic alternative. What is the difference between a generic equivalent and a generic alternative?

A: A generic equivalent has the same active ingredients as the brand name drug. Examples of generic equivalents for cholesterol drugs are simvastatin for Zocor, lovastatin for Mevacor, and pravastatin for Pravachol.

A: A generic alternative is in the same drug category or chemical family as the brand-name drug. For example, the cholesterol drugs Crestor, Lipitor, Lescol/Lescol XL, and Pravachol currently do not have generic equivalents. But possible generic alternatives or therapeutic alternatives for these drugs are simvastatin, lovastatin, and pravastatin.

Q: How do I know if a generic equivalent or a therapeutic alternative is available?

A: Ask your pharmacist or doctor. If a generic equivalent is available, your pharmacist can move you to the generic without a new prescription. If a therapeutic alternative is an option, you'll need to talk to your doctor and get a new prescription. Although it takes a little extra effort to change to a therapeutic alternative, you could save hundreds of dollars on out-of-pocket costs by moving to a generic – especially if the drug is a maintenance medication that you could be taking for several years.

You can also search the Wellmark Drug List on www.wellmark.com. The online tool will let you know if a generic equivalent is available for your brand-name drug or if there are therapeutic alternatives. You can then use the results of your search to see if any of the generic options are part of a \$4 generic program.

Q: Are generic drugs safe?

A: Generic drugs are held to the same Food and Drug Administration (FDA) standards for safety and performance as brand-name drugs. To earn FDA approval, a generic must deliver the same amount of active ingredients in the same time as the brand name. The FDA also requires generics to have the same quality, strength, purity, and stability as brand-name drugs. This assures you receive quality at a fraction of the cost.

Q: If generic drugs and brand-name drugs have the same active ingredients, why do they look different?

A: Generic drugs look different because certain inactive ingredients, such as colors and flavorings, may be different. These ingredients do not affect the performance, safety or effectiveness of the generic drug. They look different because trademark laws in the U.S. do not allow a generic drug to look exactly like other drugs already on the market.

Q: Is my generic drug made by the same company that makes the brand-name drug?

A: It is possible. Brand-name firms are responsible for manufacturing approximately 50 percent of generic drugs.



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